

PT /SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) MCES-0002
In re Application of <b>Jason T. Epps, et al.</b>		
Application Number	<b>09/004,803</b>	Filed <b>01/09/1998</b>
For Motor Operated Fast Food Service Window with Upwardly Focused Proximity Detectors		
Group Art Unit	<b>3634</b>	Examiner <b>Strimbu, G</b>

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing an **Appeal Brief** ~~reply~~ in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☒ One month (37 CFR 1.17(a)(1)) \$ 110.00

☐ Two months (37 CFR 1.17(a)(2)) \$ \_\_\_\_\_

☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_

☐ Four months (37 CFR 1.17(a)(4)) \$ \_\_\_\_\_

☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 55.00.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number \_\_\_\_\_.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

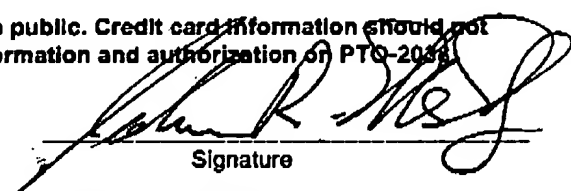
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

April 15, 2002  
Date

  
Signature  
John R Merkling  
Typed or printed name  
31,716

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

215-55.00

H 37  
H 16-02  
mel

PTO#33397 (09-00)  
Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## Certificate of Transmission under 37 CFR 1.8

FAX RECEIVED

Petition for Extension of Time (one month)  
and Fee by Credit Card for 09/004,803

APR 15 2002

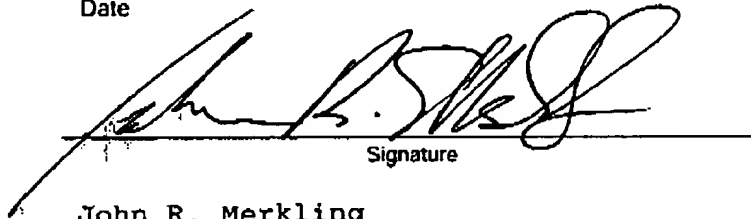
I hereby certify that this correspondence is being facsimile transmitted to the  
United States Patent and Trademark Office

GROUP 3600

Official

on April 15, 2002

Date



Signature

John R. Merkling

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify  
each submitted paper.

Group 3600 Facsimile Number: 703-872-9327

06/004: 000000 000000 000000  
000000

55:00:00

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

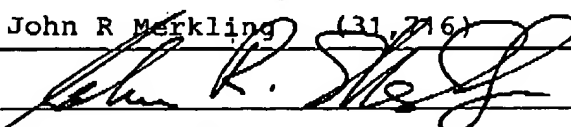
Approved for use through 10/31/2002. OMB 0651-0031

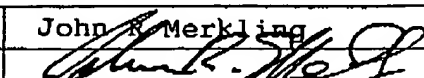
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/004,803	
	Filing Date	01/09/1998	
	First Named Inventor	Jason T. Epps	
	Group Art Unit	3634	
	Examiner Name	G. Strimbu	
Total Number of Pages in This Submission	4	Attorney Docket Number	MCES-0002

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached PTO-2038	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John R Merkling (31,716)
Signature	
Date	April 15, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being transmitted by facsimile or by first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 15, 2002			
Typed or printed name	John R Merkling	Date	April 15, 2002
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time may vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.